Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
LCV Victory Fund	
	C C00486845
Check if 24-hour report X 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Mosaic	09 10 2014
Mailing Address 1920 L St NW	Amount
City State Zip Code	28.65
City State Zip Code Washington DC 20036-5004	Transaction ID : EE4CA33FF27AF4D339DD Date of Disbursement or Obligation
Purpose of Expenditure Printing Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Offic	e Sought: House District:
Sen. Kay R Hagan Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For:
Full Name of Payee League of Conservation Voters, Inc.	Date of Public Distribution/Dissemination
Mailing Address 1920 L St NW	09 10 2014
Ste 800	Amount
City State Zip Code	71.40
Washington DC 20036-5045	Transaction ID : E771D07EBD2644F76B7E Date of Disbursement or Obligation
Purpose of Expenditure Postage Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	ce Sought: House District:
Sen. Kay R Hagan Oppose	President State: NC State:
Calendar Year-To-Date Per Election for Office Sought Disb 2014	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	100.05
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Patrick Collins [Electronically Filed] Date	09 19 2014
Oignatale	

Schedule E)	LIVI EXI ENL	DITOTILO	PAGE 2 FOR SE OF	OF 5 FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION	N NUMBER ▼
LCV Victory Fund			C C00486845	
Check if 24-hour report X 48-hour report	X New re	port Amends repo	rt filed on	Y Y Y Y Y
Full Name of Payee			Date of Public Distribution/	Dissemination
Sir Speedy			09 / 10	2014
Mailing Address 2001 L St NW			Amount	
City	State	Zip Code		164.99
Washington	DC	20036-4905	Transaction ID : E608D110 Date of Disbursement or C	
Purpose of Expenditure Printing		Category/ Type	M = M / D = D /	Y Y Y Y
Name of Federal Candidate		Support	Office Sought: House	District:
Sen. Kay R Hagan		Oppose	President X Senate	State: NC
Calendar Year-To-Date Per Election for Office Sought		375.66	Disbursement For: Primary 2014 Other (specify) ▶	General
Full Name of Payee			Date of Public Distribution/	Dissemination
League of Conservation Voters, In	C.		09 / D D /	2014
Mailing Address 1920 L St NW			Amount	
Ste 800				
City	State DC	Zip Code	Transaction ID : E0986CB1	35.69
Washington	DC	20036-5045	Date of Disbursement or C	
Purpose of Expenditure Staff Time for Mail Copy		Category/ Type	M = M / D = D /	Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought: House	District:
Sen. Kay R Hagan		Oppose	President Senate	State: NC
Calendar Year-To-Date Per Election for Office Sought		375.66	Disbursement For: Primary 2014 Other (specify) ▶	X General
(a) SUBTOTAL of Itemized Independent Expen	ditures		•	200.68
(b) SUBTOTAL of Unitemized Independent Exp	enditures		•	
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the indep with, or at the request or suggestion of, any car party committee) any political party committee of	ndidate or authorize			
Patrick Collins Signature	[Electro	onically Filed] Date	09 19 / Y Y 201	4
Signature				

Schedule E)	I EXI END	ITOTILO		PAGE 3 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
LCV Victory Fund			C	C00486845
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	rt filed on	/ / D = D / Y = Y = Y
Full Name of Payee			Date of F	Public Distribution/Dissemination
League of Conservation Voters, Inc			09	M / D D / Y T Y T Y
Mailing Address 1920 L St NW Ste 800			Amount	
City	State	Zip Code		257.95
Washington	DC	20036-5045		ion ID : E65CC7966DF834D3F9A6 Disbursement or Obligation
Purpose of Expenditure Staff and Email for Online Message		Category/ Type	Date of E	
Name of Federal Candidate		Support	Office Cought	House District:
Thom R Tillis		X Oppose	Office Sought: President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	, ,	633.61	Disbursement For 2014 Other	or: Primary ⊠ General r (specify) ▶
Full Name of Payee			Date of F	Public Distribution/Dissemination
League of Conservation Voters, Inc.			M 09	
Mailing Address 1920 L St NW			Amount	
Ste 800				
City	State	Zip Code	بسلاا	2676.13
Washington	DC	20036-5045		on ID: E2BEA54891532438E897 Disbursement or Obligation
Purpose of Expenditure Staff Time for Field Canvass		Category/ Type	М	M / D D / Y Y Y Y Y
Name of Federal Candidate		X Support	Office Sought:	House District:
Sen. Kay R Hagan		Oppose	President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		3309.74	Disbursement For 2014 Othe	or:
(a) SUBTOTAL of Itemized Independent Expenditure	· c			2934.08
(a) CODICINE OF ROMESON MAGROMACINE EXPONENTIAL				2304.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ures		•	7 1 7 1 7
(c) TOTAL Independent Expenditures			·	7 1 7 1 7 1
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Patrick Collins Signature	[Electron	ically Filed] Date		19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

Schedule E)	LAFLINDI	TOTILS		PAGE 4 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
LCV Victory Fund				C C00486845
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M
Full Name of Payee			Date	of Public Distribution/Dissemination
Mack-Sumner Communications, LLC	:			09 17 2014
Mailing Address 2001 N Beauregard St Ste 420			Amou	ınt
	State	Zip Code		5501.64
Alexandria	VA	22311-1750		saction ID : E51C9FE48EC4D4D24B8A of Disbursement or Obligation
Purpose of Expenditure T-Shirts		Category/ Type		M M / D D / Y Y Y Y Y
Name of Federal Candidate		Support	Office Sough	nt: House District:
Sen. Kay R Hagan		Oppose	Presid	NC NC
Calendar Year-To-Date Per Election for Office Sought	6	16572.48	Disbursemer 2014	nt For: Primary
Full Name of Payee			Date	of Public Distribution/Dissemination
Mack-Sumner Communications, LLC				09 17 2014
Mailing Address 2001 N Beauregard St			Amou	ınt
Ste 420			711100	411
City	State	Zip Code		23901.60
Alexandria	VA	22311-1750		action ID : E7498C99983E14E2EBD2 of Disbursement or Obligation
Purpose of Expenditure Door Hangers		Category/ Type		M
Name of Federal Candidate		X Support	Office Sough	ht: House District:
Sen. Kay R Hagan		Oppose	Presid	lent Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	, , ,	616572.48	Disbursemer 2014	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures				29403.24
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Patrick Collins Signature	[Electroni	ically Filed] Date	09	19 / 2014

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	TOTILS	PAGE 5 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
LCV Victory Fund		C C00486845
Check if 24-hour report X 48-hour report New report	ort Amends repor	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
Terra Strategies, LLC		09 17 2014
Mailing Address 321 E. Walnut Ste 340		Amount
City State	Zip Code	583859.50
Des Moines IA	50309-2013	Transaction ID : E695C54DBAF4646D9989 Date of Disbursement or Obligation
Purpose of Expenditure Field Canvass Consulting	Category/ Type	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District:
Sen. Kay R Hagan	Oppose	President X Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	616572.48	Disbursement For: Primary X General
		Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		Amount
City State	Zip Code	
Purpose of Expenditure	T	Date of Disbursement or Obligation
Purpose of Experialities	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support	Office Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date		Disbursement For: Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		583859.50
(b) SUBTOTAL of Unitemized Independent Expenditures		>
(c) TOTAL Independent Expenditures		616497.55
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Patrick Collins [Electron.	ically Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		